

PATENT NUMBER

O.I.P.E. SCANNED <i>1/10</i> O.A. <i>mc</i>	PATENT DATE
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<input type="checkbox"/> TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED			
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.		
<input type="checkbox"/> a) The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)			NOTICE OF ALLOWANCE MAILED 			
<input type="checkbox"/> b) The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____ _____ _____	_____ (Primary Examiner) (Date)			ISSUE FEE <table border="1"> <tr> <td>Amount Due</td> <td>Date Paid</td> </tr> </table>		Amount Due	Date Paid
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<input type="checkbox"/> c) The terminal _____ months of this patent have been disclaimed.	_____ (Legal Instruments Examiner) (Date)			ISSUE BATCH NUMBER			
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